ALABAMA MANUFACTURED HOUSING COMMISSION

350 SOUTH DECATUR STREET * MONTGOMERY, ALABAMA 36104 (334) 242-4036 * FAX (334) 240-3178 WWW.AMHC.ALABAMA.GOV

APPLICATION FOR SALESPERSON'S LICENSE

	□ NEW/PRO\	/ISIONAL	□ RENEWAL	
SALESPERSON'S LICENSE	NUMBER			
SALESPERSON INFORMATION				
SALESPERSON'S NAME	(First)		(MI)	(Last)
DOB/				-
MAILING ADDRESS				
CITY	S	TATE	_ ZIP	
PHONE ()		FAX ()	
COUNTY				
	RETAIL CI	ENTER INFO	<u>PRMATION</u>	
NAME OF BUSINESS				
LICENSE NUMBER				
LOCATION ADDRESS				
CITY	S	TATE	_ ZIP	
PHONE ()	FAX ()	0	COUNTY
Pursuant to the Rules and Regula hereby submit this application and Manufactured Housing Commissi laws, rules and regulations. Fe	d a non-refundable on. I certify that I w	check or mone	ey order made pay	able to the Alabama
SIGNATURE			DA ⁻	TE

(PLEASE PRINT OR WRITE LEGIBLY)